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UTILITY
PATENT APPLICATION
TRANSMITTAL

Title

Attorney Docket No.

First Inventor

Arlindo T. Jardin
Tire Stem Cap Remover

(Unly for	new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.	353648632 0 5 6			
See MPEP	APPLICATION ELEMENTS chapter 600 concerning utility patent application contents.	ADDRESS TO: Commiss	ria VA 22313-1450			
(Subm. 2. Applic See 3 3. Special (prefer Desc - Cross - State - Refer or a c - Back - Brief - Brief - Detai	fransmittal Form (e.g., PTO/SB/17) init an original and a duplicate for fee processing) cant claims small entity status. B7 CFR 1.27. ification [Total Pages 9] rred arrangement set forth below) criptive title of the invention is Reference to Related Applications ement Regarding Fed sponsored R & D rience to sequence listing, a table, computer program listing appendix tiground of the Invention Summary of the Invention i Description of the Drawings (if filed) liled Description in(s) ract of the Disclosure	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS				
5. Oath or Dec a.	poyl prom a prior application (37 CFR 1.63(d)) or continuation/divisional with Box 18 completed) DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). Illication Data Sheet. See 37 CFR 1.76	10. 37 CFR 3.73(b) Statemer (when there is an assignation 12. Information Disclosure Statement (IDS)/PTO-1. 13. Preliminary Amendment (Should be specifically in Certified Copy of Priority (if foreign priority is claim Nonpublication Request (b)(2)(B)(i). Applicant mor its equivalent. 17. Other: 18. Other: 19. Othe	Attomey cument (if applicable) Copies of IDS 449 Citations It Id (MPEP 503) itemized) by Document(s) med) it under 35 U.S.C. 122 bust attach form PTO/SB/35			
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner Art Unit: For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS						
Custon	mer Number:	OR COTTE	espondence address below			
Name	Arlindo T. Jardin					
Address	34 Seaver Street	, , , , , , , , , , , , , , , , , , , ,				
City	Stoughton	State MA	Zip Code 02072			
Country		Telephone 781-344-5663	Fax 781-436-3324			
Name (Print/Type) Arlindo T. Jardin Registration No. (Attorney/Agent)						
Signature	Celint To Tord -		Date 09/02/2003			

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 325.00

Complete if Known				
Application Number				
Filing Date				
First Named Inventor	ARLINDO T. JARDIN			
Examiner Name				
Art Unit				
Attorney Docket No.				

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)			
Cheek Credit card Money Other None	3. ADDITIONAL FEES			
Deposit Account:	Large Entity Small Entity			
Deposit Account	Fee Fee Fee Fee Fee Descrip Code (\$)	tion <u>Fee Paid</u>		
Number	051 130 2051 65 Surcharge - late filing fee	or oath		
Deposit Account Name	1052 50 2052 25 Surcharge - late provisio cover sheet	nal filing fee or		
The Director is authorized to: (check all that apply)	053 130 1053 130 Non-English specification	ı <u> </u>		
Charge fee(s) indicated below Credit any overpayments	812 2,520 1812 2,520 For filing a request for ex	parte reexamination		
Charge any additional fee(s) during the pendency of this application	804 920* 1804 920* Requesting publication o Examiner action	f SIR prior to		
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	805 1,840* 1805 1,840* Requesting publication of Examiner action	of SIR after		
FEE CALCULATION	251 110 2251 55 Extension for reply within	n first month		
1. BASIC FILING FEE	252 410 2252 205 Extension for reply withi	n second month		
Large Entity Small Entity	253 930 2253 465 Extension for reply within	n third month		
Fee Fee Fee Fee Pee Paid Code (\$) Code (\$)	254 1,450 2254 725 Extension for reply withi	n fourth month		
1001 750 2001 275 Utility Sling for	255 1,970 2255 985 Extension for reply withi	n fifth month		
1002 330 2002 165 Design filing fee	401 320 2401 160 Notice of Appeal			
1003 520 2003 260 Plant filing fee	402 320 2402 160 Filing a brief in support	of an appeal		
1004 750 2004 375 Reissue filing fee	403 280 2403 140 Request for oral hearing			
1005 160 2005 80 Provisional filing fee	451 1,510 1451 1,510 Petition to institute a put	olic use proceeding		
SUBTOTAL (1) (\$)375.	452 110 2452 55 Petition to revive - unavo	pidable		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453 1.300 2453 650 Petition to revive - unintentional			
Fee from	501 1,300 2501 650 Utility issue fee (or reiss	ue)		
Extra Claims below Fee Paid Total Claims 20** = X	502 470 2502 235 Design issue fee			
Independent 24 - 24 -	503 630 2503 315 Plant issue fee			
Claims - 3" = L A L A L A L A L A L A L A L A L A L	460 130 1460 130 Petitions to the Commis	sioner		
Lama Faithean Royal Faith	807 50 1807 50 Processing fee under 37	' CFR 1.17(q)		
Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Description	806 180 1806 180 Submission of Information			
Code (\$)	021 40 8021 40 Recording each patent a property (times number of	ssignment per of properties)		
1201 84 2201 42 Independent claims in excess of 3	809 750 2809 375 Filing a submission after (37 CFR 1.129(a))	final rejection		
1203 280 2203 140 Multiple dependent claim, if not paid	810 750 2810 375 For each additional inve examined (37 CFR 1.12			
1204 84 2204 42 ** Reissue independent claims over original patent	1801 750 2801 375 Request for Continued			
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	802 900 1802 900 Request for expedited of a design application	· · ·		
SUPTOTAL (2)	Other fee (specify)			
**or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if greater; For Reissues, see above **or number previously paid, if				

SUBMITTED BY

Name (Print/Type)

HRLINDU T. JARDIN Registration No. (Attornev/Agent)

Signature

(Complete (if applicable))

Telephone 781-3444-5663

Date

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